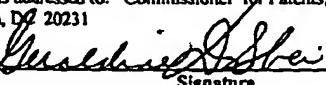


UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional application under 37 CFR 1.53(b))</i>		CERTIFICATE UNDER 37 C.F.R. 1.10 Docket No. IVD 1118-2 Express Mail Label No.: EL676469444US Date of Deposit: September 16, 2003 I hereby certify that this paper is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" Service on the date indicated above, and is addressed to: Commissioner for Patents, Box Patent Application, Washington, DC 20231  Signature	
APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>		ADDRESS TO: Commissioner for Patents Box Patent Application Washington, DC 20231	
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form <i>(Submit an original, and a duplicate for fee processing)</i></p> <p>2. <input checked="" type="checkbox"/> Specification Total Pages 112 <i>(preferred arrangement set forth below)</i></p> <ul style="list-style-type: none"> - Descriptive Title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Sequence Listing or a Table Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure <p>3. <input type="checkbox"/> Drawing(s) <i>(35 USC 113)</i> Total Sheets 112</p> <p>4. <input checked="" type="checkbox"/> Oath or Declaration/ Power of Attorney <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 16 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). </p> <p>5. <input type="checkbox"/> Application Data Sheet <i>(See 37 CFR 1.76)</i></p>		<p>6. <input type="checkbox"/> CD-Rom or CD-R, Large Table or Computer Program <i>(Appendix)</i></p> <p>7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(If applicable, all necessary)</i> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Form (CFR) b. <input type="checkbox"/> Paper copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies </p>	
ACCOMPANYING APPLICATION PARTS <ul style="list-style-type: none"> 8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney 10. <input type="checkbox"/> English Translation Document <i>(If applicable)</i> 11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 12. <input checked="" type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 14. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122(b)(2)(B)(i) 15. <input checked="" type="checkbox"/> Other: <u>Citation of References</u> 			
<p>16. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment or in an Application Data Sheet under 37 CFR 1.76:</p> <p><input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application no: <u>09/913,106</u></p> <p>Prior Application Information: Examiner: <u>Rita J. Desai</u> Group Art Unit: <u>1625</u></p> <p>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>			
<p>17. CORRESPONDENCE ADDRESS</p> <p><input checked="" type="checkbox"/> Customer Number or Bar Code Label  27546</p> <p>or <input checked="" type="checkbox"/> Correspondence address below</p> <p>Paul E. Dupont Sanofi-Synthelabo Inc. 9 Great Valley Parkway Malvern, PA 19355 Telephone No.: (610) 889-6338 Facsimile No.: (610) 889-8799</p> <p>Respectfully submitted,  Paul E. Dupont Reg. No. 27,438</p>			

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